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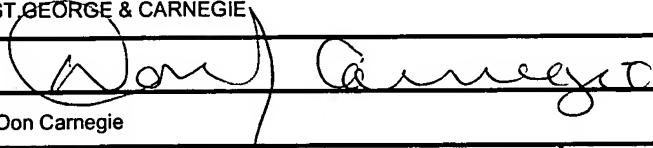
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Total Number of Pages in This Submission	Application Number 10/031,806
	Filing Date 11/19/2003

First Named Inventor
Bruce LewoltArt Unit
3714Examiner Name
Timothy MusselmanAttorney Docket Number
DW.077 U.S.

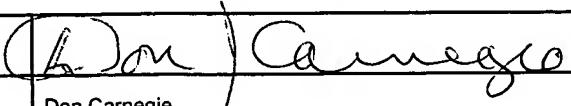
ENCLOSURES (Check all that apply)		
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<input type="checkbox"/> Remarks Express Mail: EQ 733834253 US		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	ST. GEORGE & CARNEGIE		
Signature			
Printed name	Don Carnegie		
Date	12/24/2007	Reg. No.	39622

CERTIFICATE OF TRANSMISSION/MAILING

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<p>Effective on 12/08/2004.</p> <p>FEE TRANSMITTAL For FY 2007</p> <p><input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27</p> <p>TOTAL AMOUNT OF PAYMENT (\$) 225</p>		Complete if Known <table border="1"> <tr> <td>Application Number</td> <td>10/031,806</td> </tr> <tr> <td>Filing Date</td> <td>11/19/2003</td> </tr> <tr> <td>First Named Inventor</td> <td>Bruce Lewolt</td> </tr> <tr> <td>Examiner Name</td> <td>Timothy Musselman</td> </tr> <tr> <td>Art Unit</td> <td>3714</td> </tr> <tr> <td>Attorney Docket No.</td> <td>DW.007 U.S.</td> </tr> </table>		Application Number	10/031,806	Filing Date	11/19/2003	First Named Inventor	Bruce Lewolt	Examiner Name	Timothy Musselman	Art Unit	3714	Attorney Docket No.	DW.007 U.S.
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METHOD OF PAYMENT (check all that apply)

Check Credit Card Money Order None Other (please identify): _____

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FEE CALCULATION**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

<u>Application Type</u>	<u>FILING FEES</u>		<u>SEARCH FEES</u>		<u>EXAMINATION FEES</u>		<u>Fees Paid (\$)</u>
	<u>Fee (\$)</u>	<u>Small Entity</u>	<u>Fee (\$)</u>	<u>Small Entity</u>	<u>Fee (\$)</u>	<u>Small Entity</u>	
Utility	300	150	500	250	200	100	_____
Design	200	100	100	50	130	65	_____
Plant	200	100	300	150	160	80	_____
Reissue	300	150	500	250	600	300	_____
Provisional	200	100	0	0	0	0	_____

2. EXCESS CLAIM FEESFee Description

Each claim over 20 (including Reissues)

Each independent claim over 3 (including Reissues)

Multiple dependent claims

<u>Total Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>	<u>Small Entity</u>	<u>Fee (\$)</u>	<u>Fee (\$)</u>
- 20 or HP =	x	=		50	25	
HP = highest number of total claims paid for, if greater than 20.				200	100	
				360	180	

<u>Indep. Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>	<u>Multiple Dependent Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>
- 3 or HP =	x	=				

HP = highest number of independent claims paid for, if greater than 3.

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

<u>Total Sheets</u>	<u>Extra Sheets</u>	<u>Number of each additional 50 or fraction thereof</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>
- 100 =	/ 50 =	(round up to a whole number) x	=	

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): 2 month surcharge _____ 225

SUBMITTED BY

Signature	Registration No. (Attorney/Agent) 39622	Telephone 949-854-8405
Name (Print/Type) Don Carnegie		Date 12/24/2007

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